

# Manufacturer and Product Identification

(Suggested form to comply with 49 CFR Part 566)

## Manufacturer's Information

Full Name of Company: Dlubak Specialty Glass Corporation

All Company DBAs \_\_\_\_\_

Company Principal Officer

Cotton  
Last

Chris  
First

General Manager  
Position

Company Address: 520 East Chestnut Street

Street, Suite No., P.O. Box No.

Blairsville  
City

PA  
State/Province

Indiana  
Country

15717  
Postal Code

Company Contact Info

(800) 336-0562  
Telephone

724-459-0866  
Facsimile

cotton@dlubakglass.com  
E-mail

www.dlubakglass.com  
Web Site

Submitted by Company Official

Mark A Johnson  
Printed Name

Quality Manager  
Company Position

11-26-14  
Date

Signature  
[Signature]

## Your Company Manufactures What Regulated Equipment Items? (Check all that apply)

(Regulated equipment items are only the 13 equipment listed below that are subject to a Federal motor vehicle safety standard.)

<input type="checkbox"/> Tires	<input type="checkbox"/> Rims	<input type="checkbox"/> Brake hoses	<input type="checkbox"/> Brake fluid	<input type="checkbox"/> Seat belts	<input type="checkbox"/> Lamps, Reflectors, and Assoc. Equip	<input type="checkbox"/> Motorcycle Helmets
<input checked="" type="checkbox"/> Glazing	<input type="checkbox"/> Child Restraint Systems	<input type="checkbox"/> Platform Lifts	<input type="checkbox"/> Rear Impact Guards	<input type="checkbox"/> Triangular Warning Devices	<input type="checkbox"/> CNG Containers	

## Your Company Manufactures What Types of Vehicles? (Check all that apply)

Please identify the approximate GVWR in parentheses in the space provided below.

<input checked="" type="radio"/> Passenger Cars GVWR _____ to _____	<input type="radio"/> Multipurpose Passenger Vehicles GVWR _____ to _____	<input type="radio"/> Trucks GVWR _____ to _____	<input type="radio"/> Low-Speed Vehicles GVWR _____ to _____
<input type="radio"/> Pole Trailers GVWR _____ to _____	<input checked="" type="radio"/> Buses (other than School Buses) GVWR _____ to _____	<input type="radio"/> School Buses GVWR _____ to _____	<input type="radio"/> Motorcycles GVWR _____ to _____
<input type="radio"/> Trailers GVWR _____ to _____			
<input type="radio"/> Incomplete vehicles - means an assemblage consisting, at a minimum, of chassis (including the frame) structure, power train, steering system, suspension system, and braking system, in the state that those systems are to be part of the completed vehicle, but requires further manufacturing operations to become a completed vehicle. Also means an incomplete trailer. GVWR _____ to _____			

**What Type of Vehicle Manufacturer or Alterer is Your company? (check all that apply)**

- ☐ Completed Vehicle Manufacturer - a manufacturer of vehicles that require no further manufacturing operations to perform their intended function
- ☐ Incomplete Vehicle Manufacturer - a manufacturer of incomplete vehicles, as defined above
- ☐ Intermediate Manufacturer - a manufacturer (other than the incomplete vehicle manufacturer or the final-stage manufacturer) who performs manufacturing operations on a vehicle manufactured in two or more stages
- ☐ Final-Stage Manufacturer - a manufacturer who performs such manufacturing operations on an incomplete vehicle that it becomes a completed vehicle
- ☐ Alterer - a person who alters by addition, substitution, or removal of components (other than readily attachable components), ~~a~~ vehicle before the first purchase of the vehicle other than for resale

**Instructions for Completing, Revising, and Submitting Your Information**

49 CFR Part 566 requires that a manufacturer of motor vehicles and regulated motor vehicle equipment items submit to NHTSA not later than 30 days after manufacturing begins information about the company and the products it manufactures. This suggested form will assist a manufacturer to comply with Part 566. Please complete the form by typing or clearly printing. Each manufacturer who has submitted this information must keep its entry current accurate and complete by submitting revised information not later than 30 days after the relevant changes in its business occur.

Mail the completed form to:  
Attention: VIN Coordinator  
National Highway Traffic Safety Administration  
1200 New Jersey Avenue, SE  
West Building, Room W45-2d5  
Washington, DC 20590  
Fax: 202-366-3081